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**REPORT TO: CLINICAL AND CARE GOVERNANCE COMMITTEE ON 27  
OCTOBER 2022**

**SUBJECT: CLINICAL AND CARE GOVERNANCE UPDATE**

**BY: CHIEF NURSE – MORAY**

**1. REASON FOR REPORT**

- 1.1. To provide an update to the Clinical and Care Governance Committee of the developments in relation to clinical and care governance and the intention to hold a further workshop.

**2. RECOMMENDATION**

**2.1. It is recommended that the Committee:**

- i) considers and notes the content of this report and the associated action plan (APPENDIX 1);**
- ii) acknowledges the delay in the provision of the workshop due to changes in senior personnel and the impact of the Covid-19 pandemic; and**
- iii) notes that an update will be provided in four months' time.**

**3. BACKGROUND**

- 3.1. The national Clinical and Care Governance Framework 2013 provides Integration Authorities with an overview of the key elements and principles that should be reflected in the clinical and care governance processes implemented by Integration Authorities.
- 3.2. To fulfil this requirement there is a need for Moray Integration Joint Board (MIJB) and Health and Social Care Moray (HSCM) to ensure that they provide assurance that effective arrangements are in place to ensure there is:-
- Relevant Health and Social Care professionals held accountable for standards of care provided.
  - Effective engagement with communities and partners and improved health and wellbeing outcomes are being met.

- Effective scrutiny of the quality of service performance to inform improvement priorities.
  - Clear learning and improvements generated from effective systems.
  - Support for staff if concerns are raised relating to safe service delivery.
  - Clear lines of communication and professional accountability from point of care to Executive Directors and Chief Professional Officers accountable for clinical and care governance.
- 3.3. A Clinical and Care Governance workshop was held in Elgin on 8 January 2020, the output reported to this committee on 27 February 2020 (para 9 of the minute refers) and a progress update on the finalised action plan provided on 25 February 2021 (para 7 of the minute refers.) Two of the five key themes of areas for improvement identified by the workshop were to:
- Declutter and simplify the existing reporting mechanisms and provide clarity for accountability and responsibility
  - Seek clarification from NHS Grampian, Moray Council and professional leads of their assurance requirements.
- 3.4. A report to Committee in February 2022 detailed the governance arrangements during the response to Covid-19, provided an update on progress against the action plan and proposed a follow up workshop for April / May 2022. This workshop did not take place on the proposed timescale due to staff changes throughout the clinical and care governance team.

#### **4. KEY MATTERS RELEVANT TO RECOMMENDATION**

- 4.1. HSCM are currently appraising the 2020 Clinical and Care Governance Action Plan to determine progress so far and future direction.
- 4.2. Progress has been made but since that time new key stakeholders are now in place and must be engaged in order for HSCM to move forward with actions.
- 4.3. Further scoping work is required with departments to determine the new priorities and Key Performance Indicators.
- 4.4. The intention is to pull current / new stakeholders into a consultation workshop to ensure all leaders within the partnership have an understanding of the clinical and care governance framework and requirements going forward.
- 4.5. The aim of the full workshop is to include / discuss the following proposed points. These will be refined at the consultation workshop:
- Overview of Groups/Committees – what is needed and why
  - How can HSCM evidence what is being requested
  - How can this be linked to Health and Social Care standards
  - To raise awareness of and strengthen the governance framework
  - To discuss meeting structure and terminology used
  - Discuss and confirm trends to report on – for example, Tissue Viability, Mental Health
  - Roles and responsibilities including ownership
  - Escalation process – to ensure a clear and consistent process
  - Process to share learning

- Training

- 4.6. Consideration required with regards to changes to governance for services and systems which must be incorporated – namely Children & Families and Justice Social work.
- 4.7. Key stakeholders also need to consider the impact of the National Care Services Bill and the required changes which will need to be incorporated under the auspices of this Bill.

## 5. **SUMMARY OF IMPLICATIONS**

### **(a) Corporate Plan and 10 Year Plan (Local Outcomes Improvement Plan (LOIP)) and Moray Integration Joint Board Strategic Plan “Moray Partners in Care 2019 – 2029”**

Governance arrangements are integral for the assurance of the delivery of safe and effective services that underpins the implementation of the strategic plan.

### **(b) Policy and Legal**

The Public Bodies (Joint Working) (Scotland) Act 2014 requires Health Boards and Local Authorities integrate adult health and social care services. This paper outlines the work being undertaken to ensure that the clinical and care governance framework for HSCM and partners, provides a clear understanding of the contributions and responsibilities of each person and how these are integrated.

### **(c) Financial implications**

There are no financial implications arising as a direct result of this report.

### **(d) Risk Implications and Mitigation**

The work that is being undertaken to improve the links between stakeholders and clarify the governance framework will further strengthen provision of assurance and reduce the likelihood of negative impacts to the system.

### **(e) Staffing Implications**

There are no staff implications arising as a direct result of this report.

### **(f) Property**

There are no property implications arising as a direct result of this report.

### **(g) Equalities/Socio Economic Impact**

An Equality Impact Assessment is not required because there are no changes to policy as a result of this report.

### **(h) Climate Change and Biodiversity Impacts**

No climate change or biodiversity implications have been determined for this report.

### **(i) Directions**

There are no directions required as a result of this report.

**(j) Consultations**

Consultations have taken place with Head of Clinical Governance and members of the Clinical and Care Governance Group and their comments have been incorporated in the content of this report.

**6. CONCLUSION**

- 6.1 The committee are asked to acknowledge the challenges imposed on the implementation of the clinical and care governance action plan created by the Covid-19 pandemic, including the redeployment of key personnel to frontline services. As noted a number of key stakeholders have changed posts and further engagement is required with new staff to move the agenda forward.**

Author of Report: Jacqui Shand, Clinical Governance Co-ordinator (Moray HSCP)

Background Papers: with author

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